

be taken to safeguard the information. 4. Access to such information shall be limited by IDPA and DSCC to such personnel at DSCC and IDPA who require the information to perform their duties and to such others as may be authorized under the respective regulations by IDPA and DSCC. DSCC and IDPA shall follow the requirements of Federal Regulations, 42 CFR Part 431, Subpart F, and State of Illinois Administrative Code regarding confidentiality of information concerning applicants and recipients.

IV. NON-DISCRIMINATION

Contractor shall abide by Federal Civil Rights Act of 1964, the Federal Rehabilitation Act of 1973, the Illinois Human Rights Act, and all other Federal and State laws, regulations or orders (including Executive Orders 11246 and 11375, "Equal Employment Opportunity") which prohibit discrimination because of race, color, religion, sex, national origin, ancestry, age, physical or mental handicap and Contractor further agrees to take affirmative action to insure that no unlawful discrimination is committed.

V. PERIODIC REVIEW

This agreement shall be periodically reviewed as follows:

Annual Basis: At least once a year the entire agreement shall be reviewed by the IDPA and DSCC. Such review shall be for the purpose of continuing the agreement, developing additional agreements and/or such clarifications as may be necessary.

Periodic Review: At the request of either agency a formal review may be scheduled to modify, enlarge, or terminate this agreement.

Change in the Agreement: Any changes to this agreement shall be subject to interagency discussions and concurrences in writing, thereafter to be incorporated with this document.

VI. TERMINATION

A. Either party may terminate this agreement with 30 days written notice to the other. In the event of termination, IDPA shall reimburse DSCC for all services provided by it pursuant hereto prior to the date notice of termination is received, upon receipt of requests therefore as provided herein.

B. Nothing contained herein shall be construed as an agreement to perform any illegal act or to perform any act not permitted to either IDPA or DSCC. In the event that this agreement becomes invalid or in conflict with state or federal law, it shall be terminated immediately, provided that IDPA shall reimburse DSCC for all services rendered in accordance with the terms of this agreement and pursuant to IDPA rules and regulations, upon receipt by IDPA of bills for such services. Invalidity of any provision, term or condition of this agreement for any reason shall not render any other provision, term or condition of this agreement invalid or unenforceable.

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Supersedes 81-1 Date App'd 1/23/85
State Rep. In. _____ Date Eff. 1/1/86

- C. Nothing contained herein serves to limit, alter, or amend either agency's duties, rights or responsibilities as set out in the applicable state and federal statutes, law, or regulations.

The effective date of this Agreement is

Oct. 16, 1985

OFFICIAL

Gregory L. Coler
Gregory L. Coler, Director
Illinois Department of Public Aid

The Board of Trustees of the
University of Illinois
(Division of Services for Crippled
Children)

Chief
Bureau of Non-Institutional Provider
Services

Craig B. Babin
Comptroller

Date

Earl W. Porter
Secretary

IOFA-179 # 85-18 Date Rec'd 1/10/86
Supersedes 81-1 Date Appr. 1/23/85
Date Rep. to 1/1/86

OFFICIAL

ATTACHMENT TO: Interagency Agreement between
Illinois Department of Public Aid
and
Board of Trustees, University of Illinois for
Division of Services for Crippled Children

DPA REFERRAL TO DSCC

GOAL

The Division of Services for Crippled Children (DSCC) provides medical care and related habilitative services to persons from birth to age 21 who have chronic crippling or potentially crippling conditions.

The following criteria should be met before a child is referred to DSCC:

1. The child must require a specialized medical care program appropriate to the physical impairment.
2. The child must not be under care of a specialist, trained and experienced in handling the physical impairment.
3. The child must be under 21 years of age, reside in Illinois with parents or guardians, and meet DSCC general eligibility requirements of citizenship.
4. The parents/guardians of the applicant request/consent in writing to the referral to DSCC.
5. The child must be a recipient of Medicaid.

Children who have one or more of the following medical conditions are eligible for DSCC:

1. Orthopedic conditions: e.g. club foot (feet), scoliosis.
2. Neurological conditions: e.g. cerebral palsy, severe seizures.
3. Cardiac conditions requiring diagnosis and treatment—including surgery.
4. Congenital or acquired defects requiring plastic surgery, e.g. cleft lip and palate, burn scars.
5. Organic speech defects which require long-term care including surgery.
6. Hearing loss.
7. Rheumatoid arthritis.
8. Tracheo-esophageal fistula.
9. Cystic Fibrosis.

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10. Phenylketonuria.
11. Hypothyroidism.
12. Hemophilia.
13. Galactosemia.

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REFERRAL PROCEDURES:

The Illinois Department of Public Aid Caseworker will:

1. Complete the written Application for Services.
2. Obtain signed consent of parent/legal guardian.
3. Route the completed application to the appropriate DSCC offices.

The Division of Services for Crippled Children Consultant will:

1. Determine medical eligibility.
2. Provide documentation of approval/denial for DSCC services in writing to referring IDPA Caseworker.
3. Provide programming of appropriate care in cooperation with parent/guardian for children who are medically eligible.

NOTE: Parents requesting assistance for their children who are not eligible for Medicaid but are eligible for DSCC should be encouraged to apply directly to DSCC for services.

Form 179 # 85-18 Date Rec'd 1/10/86
Supersedes _____ Date Appr. 1/23/85
Date Rep'd _____ Date Eff. 1/1/86

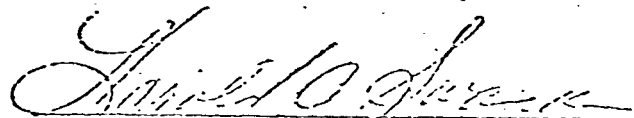
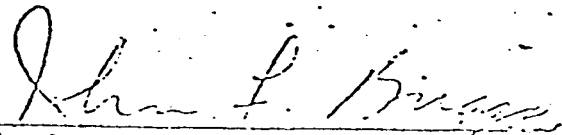
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74-1

STATE OF ILLINOIS
DEPARTMENT OF PUBLIC AIDHAROLD O. SWANK
DIRECTOR400 SOUTH SPRING STREET
SPRINGFIELD, ILLINOIS 62706AGREEMENT

The Department of Public Aid agrees to purchase psychiatric services and care from the Department of Mental Health for recipients of ADC and AABD and persons eligible for Medical Assistance only, as to amount, duration and scope of services described in the approved State Plan for Title XIX.

Reimbursement for such services will be on the same basis as payment for similar services encompassed by the Plan.

Harold O. Swank, Director
Department of Public AidJohn F. Briggs, Acting Director
Department of Mental HealthSt. Ill Tr. 1/24/74 Incorp. 12/15/75 Effective 1/1/74

74-1

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The Illinois Department of Mental Health and the Illinois Department of Public Aid jointly agree that the Department of Mental Health will provide community treatment services for Public Aid recipients residing in group care facilities. It is further agreed that the Department of Public Aid will be charged for services provided in accordance with the following procedures.

I. Public Aid Recipients Eligible for Services

- A. Any Public Aid recipient shall be eligible for community treatment services when appropriately referred for services and if the Community Treatment Services Team agrees that the recipient needs and could benefit from the provision of community treatment services. A recipient may be referred to the treatment team by the recipient's Public Aid caseworker, his private physician or the administrator of the home in which he resides when it appears that the recipient has a mental or emotional problem. Any recipient who has been discharged from a state mental institution shall be considered an appropriate referral for the 12 month period following discharge.
- B. The Community Treatment Services Team shall immediately notify the Department of Public Aid of the name and address of each recipient they determine eligible (if previously ineligible) or ineligible (if previously eligible) for treatment services.
- C. No charges shall be made under this agreement for services provided Public Aid recipients who have been determined ineligible for treatment services, except that charges may be made for a case review and determination of need for community treatment services as a result of an appropriate referral.

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II. Staff

- A. Services provided directly to Public Aid recipients and providers caring for recipients will ordinarily be provided by a Community Treatment Services Team composed of one Physician II and two Social Workers III.
- B. General supervision and clerical support of the Community Treatment Services Team will be provided by a Community Treatment Program Unit in each Mental Health Zone. The Community Treatment Program Unit will be composed of one Mental Health Zone Community Organization Executive and Clerk Stenographer(s) III and Clerk Stenographer(s) II as required.
- C. An Emergency Service Unit may be established in each Mental Health Zone if conditions and anticipated utilization indicate a need. This unit will be composed of six Social Workers (II or III or a combination).

III. Services

- A. Services to be provided by the Community Treatment Services Team will include:
- 1) review of each patient's case, determination of need for community treatment services, and if needed, prescription for continued treatment;
 - 2) consultation with recipient to help him adjust to the group care situation;
 - 3) consultation with the recipient and his family on all appropriate matters including behavior, adjustment conflicts, or any mental or emotional problem;
 - 4) consultation with the operator or staff of the home or with the recipient's private physician regarding continued treatment, medication, and rehabilitation and activity programs designed specifically to meet the recipient's mental and social needs;
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- 5) conducting workshops and training seminars for staff of the homes;
- 6) making arrangements for transferring recipients or admitting them to a mental institution, if required; and
- 7) investigating and evaluating complaints regarding care and assuring that services are provided to meet each recipient's mental and emotional needs.

B. Services to be provided by the Community Treatment Program Unit will include general supervision and coordination of the Community Treatment Program within the Mental Health Zone. All clerical functions required by the Community Treatment Program will also be provided by this unit.

C. The Emergency Service Unit will provide:

- 1) emergency consultation service by telephone 24 hours per day, 7 days a week;
- 2) crisis intervention service in the homes in an extreme emergency; and
- 3) provide emergency admission or transfer services; including transportation, on an emergency basis.

IV. Reports

A. A quarterly report shall be made for each recipient receiving community treatment services and shall include services provided and progress made by the recipient during the quarter, any special problems which exist, and a plan for treatment during the following quarter. All services provided by the Emergency Service Unit shall be included in this report and shall be identified as emergency services.

B. A quarterly report shall be made for each home in which a community treatment recipient resides and shall indicate all general (not related to a specific resident) services provided to the operator or staff of the home, and general services to be provided during the follo

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V. Charges

A. The Department of Public Aid shall be charged for services provided by the Community Treatment Services Team and the Community Treatment

Program Units, as follows:

Each team shall submit a monthly certification which shall state the name of each home visited, the name of each Public Aid recipient in the home who received treatment services during the month, and the total number of residents in the home who received treatment services during the month.

Charges will be on the basis of the actual cost of the services pro-rated according to the number of Public Aid recipients served by the team.

B. Charges for services provided by the Emergency Service Unit shall be based on the actual cost of these services, pro-rated according to the number of Public Aid recipients served by the unit.

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A G R E E M E N T**OFFICIAL**

77-3

This indenture made by and between the Illinois Department of Public Aid, hereinafter referred to as IDPA and the Illinois Department of Public Health, hereinafter referred to as IDPH;

WITNESSETH:

WHEREAS, IDPA intends to enter into contractual agreements with Health Maintenance Organizations (HMO) in order to provide comprehensive health services on a prepaid basis to eligible recipients under the Public Aid Program of the State of Illinois;

WHEREAS, IDPH intends to review Health Maintenance Organizations (HMO) in relation to issues of quality of care, cost of services, availability and accessibility of services, and utilization review; and

WHEREAS, IDPA AND IDPH recognize the importance of developing a relationship between the respective Departments;

THEREFORE IDPA AND IDPH AGREE AS FOLLOWS:

1. All proposals for HMO programs with IDPA will be received by the IDPA and one copy of each such proposal will be forwarded by IDPA to IDPH within five (5) working days for consideration and review.
2. IDPH will:
 - (a) Review proposals made by the applicants in relation to the quality of care (peer review, internal audit program, medical evaluation studies), accessibility and availability of care, utilization systems and ability to provide IDPH and IDPA with appropriate utilization data, the health education system, and medical records system in accordance with the IDPA policy position paper dated April, 1976.
 - (b) Conduct pre-contract site reviews of potential contractors in order to certify the potential HMO contractor's ability and adequacy for providing services to Public Aid recipients, facility review, the actual arrangements of their quality of care systems, utilization systems, medical records systems, and program of health education.
 - (c) Provide IDPA with an estimate of maximum acceptable enrollment of IDPA recipients in the HMO plan by site.

Illinois 2/15/77 Incorp. 4/26/77 Effective 12/1/76